

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122638

Entity Name: ELLEIFE MEDICAL SUPPLY, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

16201 SW 95 AVE STE #218
MIAMI, FL 33189

New Principal Place of Business:

1315 SW 66 STREET
105-A
MIAMI, FL 33183

Current Mailing Address:

16201 SW 95 AVE STE #218
MIAMI, FL 33189

New Mailing Address:

1315 SW 66 STREET
105-A
MIAMI, FL 33183

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, JOEL
16201 SW 95 AVE STE #218
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

GOMEZ, JOEL
1315 SW 66 STREET
105-A
MIAMI, FL 33183 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOEL GOMEZ

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GOMEZ, JOEL
Address: 16201 SW 95 AVE STE #218
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE (X) Change () Addition
Name: GOMEZ, JOEL
Address: 1315 SW 66 STREET # 105-A
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL GOMEZ

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date